## **Westside Firewood Special Request Form**

**Date of Request:** 

Please complete the entire form before submitti	ng. Please allow 2 weeks for review.
Contact Phone Number(s)	First Name
Please describe the location of the down wood:	
Road Number and Mileage from nearest junction, T/R/S, or GPS Coordinates:	
Distance from roadside (Must be within 100 feet of road edge).	
Is the down wood at least 300 feet away from water?	
Is the down wood located in a log deck, or in a timber sale unit?	
Is there any paint or tags on the down wood?	
For areas on the Clackamas River District, have you reviewed the Roads Table before submitting this request?	
I understand that collecting firewood in the requested area requires a valid firewood permit, updated "Weekly Information Sheet" any required attachments, and an approved copy of this request. I understand that this request does not guarantee or reserve the firewood for me, and that this area may also be approved for another party.	
Initials	
Allow up to two weeks for review of your request. You will be notified on the status of your request  Additional comments you would like to share:  You may submit your request for the Zigzag or Clackamas River Ranger District in person, by fax or by mail.	
Tou may submit your request for the Zigzag of Clackamas N	aver Ranger District in person, by tax or by man.
Clackamas River Ranger District 595 NW Industrial Way Estacada OR 97023 Attn: SFP Coordinator. Fax: 503-630-2299	Zigzag Ranger District 70220 E. Hwy 26 Zigzag OR 97049 Attn: SFP Coordinator Fax: 503-622-5622
THE FOLLOWING SECTION TO BE COM	PLETED BY FOREST SERVICE
Request Approved Request Denied	Termination: November 30 <sup>th</sup> of current year
Comments:	
Special Forest Products Coordinator Initials: D	Pate Requestor is Notified